#### **Application Data Sheet**

### **Application Information**

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification:: N/A

Suggested Group Art Unit:: N/A

CD-ROM or CD-R:: N/A

Number of CD disks:: N/A

Number of copies of CDs:: N/A

Sequence submission:: N/A

Computer Readable Form (CRF):: N/A

Title:: PUNCH HOLDER AND STORAGE TOOL

Attorney Docket Number:: P06555US1

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 2

Small Entity:: Yes

Petition included:: No

Licensed US Govt Agency:: No

Contract or Grant Numbers:: N/A

Secrecy Order in Parent Appl:: No

1 Initial 2/25/04

#### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full capacity

Given Name:: Mark

Middle Name:: A

Family Name:: Voves

City of Residence:: Cresco

State or Province of Residence:: IA

Country of Residence:: US

Street of mailing address:: 718 Yankee Avenue

City of mailing address:: Cresco

State or Province of

mailing address::

Country of mailing address:: US

Postal or Zip Code of

mailing address::

52136

# **Correspondence Information**

Correspondence Customer Number:: 34082

Name:: Zarley Law Firm, P.L.C.

Street of mailing address:: Capital Square

400 Locust Street, Suite 200

City of mailing address:: Des Moines

State or Province of mailing IA

Address::

Country of mailing address:: US

Postal Zip Code or mailing 50309-2350

Address::

Phone number:: 515-558-0200

FAX number:: 515-558-7790

E-Mail address:: <u>dzarley@zarleylaw.com</u>

2 Initial 2/25/04

# **Representative Information**

Representative Customer Number::	34082	
Representative Designation::	Registration Number::	Representative Name::
Primary	18,543	Donald H. Zarley
Associate	45,253	Timothy J. Zarley
Associate	50,153	James J. Lynch
Associate	54,583	Scott R. Kaspar

**Domestic Priority Information** 

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This is a	Continuation of	60/450,442	02-26-2003
	<b>]</b>		

# **Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
		-	

Assignee	Inform	ation
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Assignee name::

N/A

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::